

Healthy Behaviors Survey of 8th, 10th, and 12th Grade Students

All of your answers will be kept strictly confidential. This means your answers are secret. This survey is completely voluntary. You can skip any questions that you do not want to answer.

Thank you very much.

INSTRUCTIONS

1. This is not a test, so there are no right or wrong answers.
2. All of the questions should be answered by marking one of the answer spaces. If you do not find an answer that fits exactly, use the one that comes closest. If any question does not apply to you, or you are not sure what it means, just leave it blank.
3. Your answers will be read automatically by a scanner and computer. Please follow these instructions carefully.
4. For questions that have the following answers: NO!! no yes YES!!

Mark the little **yes** if you think the statement is MOSTLY TRUE for you.

Mark the big **NO!!** if you think the statement is DEFINITELY NOT TRUE for you.

Example: Chocolate is the best ice cream flavor.

☐ NO!! ☐ no ☐ yes ☒ YES!!

- Use a No. 2 pencil or a blue or black pen only.
- Do not use pens with ink that soaks through the paper.
- Make solid marks that fill the response completely.
- Make no stray marks on this form.

☒ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

PLEASE DO NOT WRITE IN THIS AREA

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SERIAL #

These questions ask for some general information about the people completing the survey. Please mark the response that best describes you.

1. How old are you?

- ☐ 10 ☐ 15
☐ 11 ☐ 16
☐ 12 ☐ 17
☐ 13 ☐ 18
☐ 14 ☐ 19 or older

2. What grade are you in?

- ☐ 8th ☐ 10th ☐ 12th

3. Are you: ☐ Female ☐ Male

4. What do you consider yourself to be?
Select ONE only.

- ☐ Hispanic ☐ Not Hispanic

5. What do you consider yourself to be?
Select ONE OR MORE.

- ☐ American Indian or Alaskan native
☐ Asian
☐ Black or African-American
☐ Native Hawaiian or other Pacific Islander
☐ White

6. Think of where you live most of the time.
Which of the following people live there with you?

Choose ALL that apply.

- ☐ Mother ☐ Sister(s)
☐ Father ☐ Brother(s)
☐ Stepmother ☐ Stepsister(s)
☐ Stepfather ☐ Stepbrother(s)
☐ Grandmother(s) ☐ Other children
☐ Grandfather(s)
☐ Foster parent
☐ Other adults

7. What language do you use most often at home?

- ☐ English
☐ Spanish
☐ Another Language

The next section asks about your experiences at school.

8. Putting them all together, what were your grades like last year?

- ☐ Mostly Fs ☐ Mostly Bs
☐ Mostly Ds ☐ Mostly As
☐ Mostly Cs

9. There are lots of chances for students in my school to get involved in sports, clubs, and other school activities outside of class.

- ☐ NO!! ☐ no ☐ yes ☐ YES!!

10. I feel safe at my school.

- ☐ NO!! ☐ no ☐ yes ☐ YES!!

11. Now thinking back over the past year in school, how often did you enjoy being in school?

- ☐ Never
☐ Seldom
☐ Sometimes
☐ Often
☐ Almost always

The next section asks about how you spend your time after school.

On an average school day, how many hours do you:

12. ...watch TV?

- ☐ Not at all ☐ 3 hours per day
☐ Less than 1 hour per day ☐ 4 hours per day
☐ 1 hour per day ☐ 5 or more hours per day
☐ 2 hours per day

13. ...play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)

- ☐ Not at all ☐ 3 hours per day
☐ Less than 1 hour per day ☐ 4 hours per day
☐ 1 hour per day ☐ 5 or more hours per day
☐ 2 hours per day

The next questions ask about your feelings and experiences in other parts of your life.

14. I ignore rules that get in my way.

- ☐ Very false
☐ Somewhat false
☐ Somewhat true
☐ Very true

15. I do the opposite of what people tell me to just to get them mad.

- ☐ Very false
☐ Somewhat false
☐ Somewhat true
☐ Very true

16. I like to see how much I can get away with.

- ☐ Very false
☐ Somewhat false
☐ Somewhat true
☐ Very true

How many times have you:

17. ...done what felt good no matter what?
- ☐ Never
 - ☐ I've done it, but not in the past year
 - ☐ Less than once a month
 - ☐ About once a month
 - ☐ Two or three times a month
 - ☐ Once a week or more
18. ...done something dangerous because someone dared you to do it.
- ☐ Never
 - ☐ I've done it, but not in the past year
 - ☐ Less than once a month
 - ☐ About once a month
 - ☐ Two or three times a month
 - ☐ Once a week or more
19. ...done crazy things even if they are a little dangerous.
- ☐ Never
 - ☐ I've done it, but not in the past year
 - ☐ Less than once a month
 - ☐ About once a month
 - ☐ Two or three times a month
 - ☐ Once a week or more

The next two questions ask about safety.

How many times have you:

20. ...ridden in a car or other vehicle without wearing a seatbelt?
- ☐ Never
 - ☐ I've done it, but not in the past year
 - ☐ Less than once a month
 - ☐ About once a month
 - ☐ Two or three times a month
 - ☐ Once a week or more
21. ...ridden in a car or other vehicle driven by someone who had been drinking alcohol?
- ☐ Never
 - ☐ I've done it, but not in the past year
 - ☐ Less than once a month
 - ☐ About once a month
 - ☐ Two or three times a month
 - ☐ Once a week or more
22. ...driven a car or other vehicle when you had been drinking alcohol?
- ☐ Never
 - ☐ I've done it, but not in the past year
 - ☐ Less than once a month
 - ☐ About once a month
 - ☐ Two or three times a month
 - ☐ Once a week or more

The next section asks about things you might have done, or that might have happened to you.

Remember, your answers are confidential.

How many times in the past year have you:

23. ...carried a weapon other than a handgun (such as a knife or club)?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |
24. ...taken a weapon other than a handgun (such as a knife or club) to school?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |
25. ...bullied, taunted, ridiculed, or teased someone?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |
26.said something bad about someone's race or culture?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |
27.been suspended from school?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |
28.carried a handgun?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |
29.sold illegal drugs?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |
30.stolen or tried to steal a motor vehicle (such as a car or a motorcycle)?
- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

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SERIAL #

How many times in the past year have you:

31.been arrested?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

32.attacked someone with the idea of seriously hurting them?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

33.been drunk or high at school?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

34.taken a handgun to school?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

How many times in the past year has anyone done any of the following TO YOU:

35.attacked you with the idea of seriously hurting you?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

36.threatened or injured you with a weapon (such as a gun, knife, or club)?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

37.bullied, taunted, ridiculed, or teased you?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

38.said something bad about your race or culture?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

39.sexually harassed you?

- | | |
|------------------------------------|--|
| <input type="radio"/> Never | <input type="radio"/> 10 to 19 times |
| <input type="radio"/> 1 to 2 times | <input type="radio"/> 20 to 29 times |
| <input type="radio"/> 3 to 5 times | <input type="radio"/> 30 to 39 times |
| <input type="radio"/> 6 to 9 times | <input type="radio"/> 40 or more times |

40. Have you ever belonged to a gang?

- ☐ Yes ☐ No

41. If you have ever belonged to a gang, did the gang have a name?

- ☐ Yes
☐ No
☐ I have never been in a gang

42. How many of your four best friends have been members of a gang?

- ☐ None ☐ 1 ☐ 2 ☐ 3 ☐ 4

43. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?

- ☐ Yes ☐ No

44. Have you ever been physically forced to have sexual intercourse when you did not want to?

- ☐ Yes ☐ No

The next section asks about your feelings during the past 12 months.

Remember, your answers are confidential.

During the past 12 months, did you ever:

45. ...feel so sad or hopeless almost every day for weeks or more in a row that you stopped doing some usual activities?

- ☐ Yes ☐ No

46.seriously consider attempting suicide?

- ☐ Yes ☐ No

47.actually attempt suicide?

- ☐ Yes ☐ No

The next questions ask what you think about tobacco, alcohol, and other drug use.

48. How much do you think people risk harming themselves (physically or in other ways) if they smoke one or more packs of cigarettes per day?

- ☐ No risk
☐ Slight risk
☐ Moderate risk
☐ Great risk

49. How wrong do you think it is for someone your age to smoke cigarettes?

- ☐ Very wrong
☐ Wrong
☐ A little bit wrong
☐ Not wrong at all

The next section asks about your experiences with tobacco, alcohol, and other drugs.

50. Have you ever used smokeless tobacco (chew, snuff, plug, dipping tobacco, or chewing tobacco)?
- ☐ Never
 - ☐ Once
 - ☐ Twice
 - ☐ 3-5 times
 - ☐ 6-9 times
 - ☐ 10 or more times
51. How frequently have you used smokeless tobacco during the past 30 days?
- ☐ Never
 - ☐ Once or twice
 - ☐ Once in a while, but not regularly
 - ☐ About once a day
 - ☐ More than once a day
52. Have you ever smoked cigarettes in your lifetime?
- ☐ Never
 - ☐ Once or twice
 - ☐ Once in a while, but not regularly
 - ☐ Regularly in the past
 - ☐ Regularly now
53. How often have you smoked cigarettes during the past 30 days?
- ☐ Not at all
 - ☐ Less than one cigarette per day
 - ☐ One to five cigarettes per day
 - ☐ About one-half pack per day
 - ☐ About one pack per day
 - ☐ About one and one half packs per day
 - ☐ Two or more packs per day

On how many occasions (if any) have you:

54. ...had beer, wine, or hard liquor in your lifetime (more than just a few sips)?
- | | |
|-------------------------------------|--|
| <input type="radio"/> 0 occasions | <input type="radio"/> 10-19 occasions |
| <input type="radio"/> 1-2 occasions | <input type="radio"/> 20-39 occasions |
| <input type="radio"/> 3-5 occasions | <input type="radio"/> 40 or more occasions |
| <input type="radio"/> 6-9 occasions | |
55. ...had beer, wine, or hard liquor during the past 30 days?
- | | |
|-------------------------------------|--|
| <input type="radio"/> 0 occasions | <input type="radio"/> 10-19 occasions |
| <input type="radio"/> 1-2 occasions | <input type="radio"/> 20-39 occasions |
| <input type="radio"/> 3-5 occasions | <input type="radio"/> 40 or more occasions |
| <input type="radio"/> 6-9 occasions | |
56. ...used marijuana in your lifetime?
- | | |
|-------------------------------------|--|
| <input type="radio"/> 0 occasions | <input type="radio"/> 10-19 occasions |
| <input type="radio"/> 1-2 occasions | <input type="radio"/> 20-39 occasions |
| <input type="radio"/> 3-5 occasions | <input type="radio"/> 40 or more occasions |
| <input type="radio"/> 6-9 occasions | |

57. ...used marijuana during the past 30 days?

<input type="radio"/> 0 occasions	<input type="radio"/> 10-19 occasions
<input type="radio"/> 1-2 occasions	<input type="radio"/> 20-39 occasions
<input type="radio"/> 3-5 occasions	<input type="radio"/> 40 or more occasions
<input type="radio"/> 6-9 occasions	

58. ...used LSD or other hallucinogens (acid, angel dust, special k, shrooms) in your lifetime?

<input type="radio"/> 0 occasions	<input type="radio"/> 10-19 occasions
<input type="radio"/> 1-2 occasions	<input type="radio"/> 20-39 occasions
<input type="radio"/> 3-5 occasions	<input type="radio"/> 40 or more occasions
<input type="radio"/> 6-9 occasions	

59. ...used LSD or other hallucinogens (acid, angel dust, special k, shrooms) in the past 30 days?

<input type="radio"/> 0 occasions	<input type="radio"/> 10-19 occasions
<input type="radio"/> 1-2 occasions	<input type="radio"/> 20-39 occasions
<input type="radio"/> 3-5 occasions	<input type="radio"/> 40 or more occasions
<input type="radio"/> 6-9 occasions	

60. Think back over the last two weeks. How many times have you had five or more alcoholic drinks in a row?

<input type="radio"/> None	<input type="radio"/> 3-5 times
<input type="radio"/> Once	<input type="radio"/> 6-9 times
<input type="radio"/> Twice	<input type="radio"/> 10 or more times

On how many occasions (if any) have you:

61.used cocaine or crack in your lifetime?

<input type="radio"/> 0 occasions	<input type="radio"/> 10-19 occasions
<input type="radio"/> 1-2 occasions	<input type="radio"/> 20-39 occasions
<input type="radio"/> 3-5 occasions	<input type="radio"/> 40 or more occasions
<input type="radio"/> 6-9 occasions	

62. ...used cocaine or crack in the past 30 days?

<input type="radio"/> 0 occasions	<input type="radio"/> 10-19 occasions
<input type="radio"/> 1-2 occasions	<input type="radio"/> 20-39 occasions
<input type="radio"/> 3-5 occasions	<input type="radio"/> 40 or more occasions
<input type="radio"/> 6-9 occasions	

63. ...sniffed glue, breathed (huffed) the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in your lifetime?

<input type="radio"/> 0 occasions	<input type="radio"/> 10-19 occasions
<input type="radio"/> 1-2 occasions	<input type="radio"/> 20-39 occasions
<input type="radio"/> 3-5 occasions	<input type="radio"/> 40 or more occasions
<input type="radio"/> 6-9 occasions	

64. ...sniffed glue, breathed (huffed) the contents of an aerosol spray can, or inhaled other gases or sprays in order to get high in the past 30 days?

<input type="radio"/> 0 occasions	<input type="radio"/> 10-19 occasions
<input type="radio"/> 1-2 occasions	<input type="radio"/> 20-39 occasions
<input type="radio"/> 3-5 occasions	<input type="radio"/> 40 or more occasions
<input type="radio"/> 6-9 occasions	

- ☐ Never have ☐ 12 ☐ 15
☐ 10 or younger ☐ 13 ☐ 16
☐ 11 ☐ 14 ☐ 17 or older

SERIAL #

82. Have you ever had sexual intercourse?

☐ Yes ☐ No

If you have NEVER had sexual intercourse, please SKIP to Question #89. →

83. How old were you when you had sexual intercourse for the first time?

- ☐ I have never had sexual intercourse
- ☐ 11 years old or younger
- ☐ 12 years old
- ☐ 13 years old
- ☐ 14 years old
- ☐ 15 years old
- ☐ 16 years old
- ☐ 17 years old or older

84. During your life, with how many people have you had sexual intercourse?

- ☐ I have never had sexual intercourse
- ☐ 1 person
- ☐ 2 people
- ☐ 3 people
- ☐ 4 people
- ☐ 5 people
- ☐ 6 or more people

85. During the past 3 months, with how many people did you have sexual intercourse?

- ☐ I have never had sexual intercourse
- ☐ I have had sexual intercourse but not during the past 3 months
- ☐ 1 person
- ☐ 2 people
- ☐ 3 people
- ☐ 4 people
- ☐ 5 people
- ☐ 6 or more people

86. Did you drink alcohol or use drugs before you had sexual intercourse the last time?

- ☐ I have never had sexual intercourse
- ☐ Yes ☐ No

87. The last time you had sexual intercourse, did you or your partner use a condom?

- ☐ I have never had sexual intercourse
- ☐ Yes ☐ No

88. The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy?

Select only ONE response.

- ☐ I have never had sexual intercourse
- ☐ No method was used to prevent pregnancy
- ☐ Birth control pills
- ☐ Condoms
- ☐ Depo-Provera (injectable birth control)
- ☐ Withdrawal
- ☐ Some other method
- ☐ Not sure

The next questions ask about body weight.

89. How do you describe your weight?

- ☐ Very underweight
- ☐ Slightly underweight
- ☐ About the right weight
- ☐ Slightly overweight
- ☐ Very overweight

90. Which of the following are you trying to do about your weight?

- ☐ Lose weight
- ☐ Gain weight
- ☐ Stay the same weight
- ☐ I am not trying to do anything about my weight

During the past 30 days, did you:

91. ...exercise to lose weight or to keep from gaining weight?

- ☐ Yes ☐ No

92. ...eat less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight?

- ☐ Yes ☐ No

93. ...go without eating for 24 hours or more (also called fasting) to lose weight or to keep from gaining weight?

- ☐ Yes ☐ No

94. ...take any diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? *Do not include meal replacement products (such as Slim Fast).*

- ☐ Yes ☐ No

95. ...vomit or take laxatives to lose weight or to keep from gaining weight?

- ☐ Yes ☐ No

The next questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

During the past 7 days:

96. ...how many times did you eat fruit? *Do not count fruit juice.*

- ☐ I did not eat fruit during the past 7 days
- ☐ 1 to 3 times during the past 7 days
- ☐ 4 to 6 times during the past 7 days
- ☐ 1 time per day
- ☐ 2 times per day
- ☐ 3 times per day
- ☐ 4 or more times per day

During the past 7 days:

97. ...how many times did you eat vegetables?

- ☐ I did not eat vegetables during the past 7 days
- ☐ 1 to 3 times during the past 7 days
- ☐ 4 to 6 times during the past 7 days
- ☐ 1 time per day
- ☐ 2 times per day
- ☐ 3 times per day
- ☐ 4 or more times per day

98. ...how many times did you drink a can, bottle, or glass of soda or pop, (such as Coke, Pepsi, or Sprite)? *Do not include diet soda or diet pop.*

- ☐ I did not drink soda or pop during the past 7 days
- ☐ 1 to 3 times during the past 7 days
- ☐ 4 to 6 times during the past 7 days
- ☐ 1 time per day
- ☐ 2 times per day
- ☐ 3 times per day
- ☐ 4 or more times per day

99. ...how many glasses of milk did you drink?
Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.

- ☐ I did not drink milk during the past 7 days
- ☐ 1 to 3 times during the past 7 days
- ☐ 4 to 6 times during the past 7 days
- ☐ 1 time per day
- ☐ 2 times per day
- ☐ 3 times per day
- ☐ 4 or more times per day

The next section asks about physical activity.

100. During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? *Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.*

- ☐ 0 days ☐ 4 days
☐ 1 day ☐ 5 days
☐ 2 days ☐ 6 days
☐ 3 days ☐ 7 days

101. During the past 12 months, on how many sports teams did you play? *Include any teams run by your school or community groups.*

- ☐ 0 teams
- ☐ 1 team
- ☐ 2 teams
- ☐ 3 or more teams

These questions ask about the neighborhood and community where you live.

Would a kid in your neighborhood, or the area around where you live, be caught by the police if he or she:

102. ...smoked marijuana?

- ☐ NO!! ☐ no ☐ yes ☐ YES!!

103. ...drank some beer, wine, or hard liquor
(for example, vodka, whiskey, or gin)?

- ☐ NO!! ☐ no ☐ yes ☐ YES!!

104. ...carried a handgun?

- ☐ NO!! ☐ no ☐ yes ☐ YES!!

How wrong would most adults in your neighborhood, or the area around where you live, think it is for kids your age to:

105. ...use marijuana?

- ☐ Very wrong
- ☐ Wrong
- ☐ A little bit wrong
- ☐ Not wrong at all

106. ...drink alcohol?

- ☐ Very wrong
- ☐ Wrong
- ☐ A little bit wrong
- ☐ Not wrong at all

107. ...smoke cigarettes?

- ☐ Very wrong
- ☐ Wrong
- ☐ A little bit wrong
- ☐ Not wrong at all

108. How often do you attend religious services or activities?

- ☐ Never
- ☐ Rarely
- ☐ 1-2 times a month
- ☐ About once a week or more

109. How honest were you in filling out this survey?

- ☐ I was very honest
- ☐ I was honest pretty much of the time
- ☐ I was honest some of the time
- ☐ I was honest once in a while

***This is the end of the survey.
Thank you for participating.***

PLEASE DO NOT WRITE IN THIS AREA

[illegible]

SERIAL #